US Department of Labor Office of Labor Management Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved
Office of Management
and Budget
No 1215-0188
Expires 11 30 2006

This report is mandatory under P L 86-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 04671	2 Fiscal Year Covered From				
	1 / 1 / 2005 Through 12 / 31 / 2005				
3 Name and address of person filing	4 Name file number and address of labor organization				
Name Mark D Whitchurch	Name BLE-T Local Division 24				
	Labor Organization File Number 006-214				
P O Box Bldg Room No If any PO Box 1262	P O Box Building and Room Number if any PO Box 1262				
Street 118 Country Club Estates	Street 118 Country Club Estates				
City SALEM	City Salem				
State	State Tllinois ZIP Code + 4 62881 3630				
5 Position in labor organization Local Chairman					
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions) A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of					
monetary value from an employer whose employees your organization 6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income				
Name CN Railway	Hotel room & various dinners aprox 3 amount was over \$250 for the year				
Trade Name if any					
PO Box Bidg Room No if any					
Street	7 b Amount				
	of the department of the second of the secon				
City Horsewood	\$250				
State Illinois (), ZIP Code +4	,				
Signature					
15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned sknowledge and belief the correct and complete (See the section on penalties in the instructions.)					
Signed W. B. AWG C.	,				
	On 03/31/2006 618-548 9423				

Name of Person Filing Mark Whitchurch	File	e Number U 04	671				
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested							
8 Name and address of Business (including trade name if any)	9 Business deals with						
Name Kujawski & Nowak	a Labor Organization						
Trade Name If any	Account		•				
PO Box Bldg Room No Ifany Suite 2	b Trust						
Street 1331 Park Plaza Drive	C Employer						
City O Fallon							
State Illinois ZIP Code + 4 62269							
10 If 9 b or 9 c is checked give trust or employer's name	11 a Nature of such dealing						
Name	Attended various dinn (aproximately 4) The excess of \$250 00	ers at difference amount of	erent locations all was probably in				
Trade Name if any	CACCOB OI VIII						
PO Box Bldg Room No If any			±.				
Street	11 b Approximate dollar value of	f such dealing	\$250				
City	12 a Nature of interest held or						
State ZIP Code + 4							
			4				
			ļ				
	The second secon						
	12 b Amount						
C Received from any employer (other than an employer covered unde or from any labor relations consultant to an employer any payment of money	r parts A and B above) or other thing of value						
13 a Name and address of Employer or Labor Relations Consultant (including trade name if any)	14 a Nature of payment						
Name							
Trade Name if any			Add victoria de la companya de la co				
P O Box Bldg Room No If any			- Company				
City							
State ZIP Code + 4			•				
factoring branches	14 b Amount of payment						
13 b Is the Business an Employer or Consultant ?	• •						

Name of Person Filing Mark Whitchurch	File Number U	04671

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

	9 Business deals with	
8 Name and address of Business (including trade name if any)	o buomoo doblo min	
Name Hoey \$ Farina PC		
	a Labor Organization	
Trade Name if any		
D.O. Day Bldg. Boom No. if cay by	b Trust	
PO Box Bldg Room No if any Suite 200		
Street 542 South Dearborn	c Employ€r	
City Chicago		
State Illinois ZIP Code + 4 60605		
10 If 9 b or 9 c is checked give trust or employer s name	11 a Nature of such dealing	
Name	Dinners with aproximate value in ex	cess of \$250 00
Trade Name If any		11
		ŧ
P O Box Bldg Room No If any		'
Street		
City		
State ZIP Code + 4	11 b Approximate dollar value of such dealing	\$250
	12 a Nature of interest held or income received	
		1
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		1
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 	ر ودر در مغیرهمیورد به خباطبول منظرین منصد	
	12 b Amount	